



Attorney Docket No.: SONY-50P3806

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gina C. Eubanks

Application No.: 09/661,578

Group No.: 2151

Filed: 09/14/00

Examiner: Dinh, Khanh Q.

Confirmation No.: 9174

For: INTERNET STRAWMAN AND USER INTERFACE THEREFOR

Assistant Commissioner for Patents
Washington, D.C. 20231

TRANSMITTAL OF NOTICE OF APPEAL

1. Transmitted Herewith, Is A Notice Of Appeal
2. STATUS OF APPLICANT
This application is on behalf of
☒ other than a small entity
☐ a small entity
A verified statement:
☐ is attached
☐ was already filed
3. FEE FOR FILING NOTICE OF APPEAL
Pursuant to 37 C.F.R. 1.17(f), the fee for filing the Notice of Appeal is:
☐ small entity \$250.00
☒ other than small entity \$500.00

Notice of Appeal fee due \$500.00

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

☒ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

FACSIMILE

☐ transmitted by facsimile to the Patent Trademark Office.

Date: 1/11/06

Katherine Rinaldi
Signature

Katherine Rinaldi
Type or print name of person certifying

William A. Zarbis

SIGNATURE OF ATTORNEY

William A. Zarbis
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San Jose, CA 95113
Tel. No.: (408) 938-9060



Patent
Docket No.: SONY-50P3806

Notice of Appeal

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Gina C. Eubanks
Application No.: 09/661,578
Filed: 09/14/00
Confirmation No: 9174
Group Art Unit:
Examiner:
Title: INTERNET STRAWMAN AND USER INTERFACE THEREFOR

Commissioner for Patents
P.O. Box 145
Alexandria, VA 22313-1450

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES**

Applicant hereby appeals to the Board from the decision of the Primary Examiner, mailed 11/02/05, finally rejecting claims 1-25.

- The item(s) checked below are appropriate:
1. STATUS OF APPLICANT
This application is on behalf of
[x] other than a small entity.
[] a small entity.
[] A verified statement
[] is attached.
[] was already filed on _____

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING	FACSIMILE
<input checked="" type="checkbox"/> deposited with the United States Postal Service, with sufficient postage, as first class mail in an envelope addressed to the Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.	<input type="checkbox"/> transmitted by facsimile to the Patent and Trademark Office.

Date: 1/11/06

Katherine Rinaldi
Signature
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(type or print name of person certifying)

2. FEE FOR FILING NOTICE OF APPEAL

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☒ other than a small entity \$500.00

Notice of Appeal fee due \$ 500.00

3. EXTENSION OF TERM

The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d)) for the total number of months checked below:

<u>Extension (months)</u>	<u>Fee for other than small entity</u>	<u>Fee for small entity</u>
<input type="checkbox"/> one month	\$120.00	\$60.00
<input type="checkbox"/> two months	\$450.00	\$220.00
<input type="checkbox"/> three months	\$1,020.00	\$510.00
<input type="checkbox"/> four months	\$1,590.00	\$795.00

Fee \$ _____

If an additional extension of time is required, please consider this a petition therefor.

- ☐ An extension for _____ months has already been secured. The fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested.
Extension fee due with this request \$_____

or

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

4. TOTAL FEE DUE

The total fee due is:

Notice of Appeal fee \$ 500.00

Extension fee (if any) \$ _

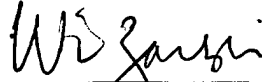
TOTAL FEE DUE \$ 500.00

5. FEE PAYMENT

- ☒ Attached is a check in the sum of \$ 500.00.
- ☐ Change Account No. _____ the sum of \$_____. A duplicate of this transmittal is attached.

6. FEE DEFICIENCY

If any additional fee is required, charge Account No. 23-0085.



SIGNATURE OF ATTORNEY

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Reg. No.: 46,120

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